## Case 16-82340 Doc 1 Filed 10/04/16 Entered 10/04/16 16:25:23 Desc Main Document Page 1 of 54

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Stephanie First name  A.  Middle name	First name  Middle name
	Bring your picture identification to your meeting with the trustee.	Rector  Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6044	

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Case number (if known)

Debtor 1 Stephanie A. Rector

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs **EINs** If Debtor 2 lives at a different address: Where you live 521 Lincoln St Algonquin, IL 60102 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code **McHenry** County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. 521 Lincoln St Algonquin, IL 60102 Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Stephanie A. Rector

Case number (if known)

ar	Tell the Court About	Your E	Bankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Requir</i> f page 1 and check the app	ed by 11 U.S.C. § 342(b) for Individ ropriate box.	duals Filing for Bankruptcy		
	choosing to file under	Chapter 7							
		□с	Chapter 11						
		☐ Chapter 12							
		Πс	Chapter 13						
3.	How you will pay the fee		about how yo	u may pay. Туր attorney is sub	pically, if you are paying the	e check with the clerk's office in you fee yourself, you may pay with cas ur behalf, your attorney may pay wi	sh, cashier's check, or money		
					tallments. If you choose thits (Official Form 103A).	s option, sign and attach the Applie	cation for Individuals to Pay		
			ŭ		,	option only if you are filing for Cha	apter 7. By law, a judge may,		
			applies to you	ır family size aı	nd you are unable to pay the	ly if your income is less than 150% be fee in installments). If you choose d (Official Form 103B) and file it wit	this option, you must fill out		
).	Have you filed for bankruptcy within the	■ No							
	last 8 years?	☐ Ye							
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy cases pending or being	■ No	0						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	∋s.						
			Debtor			Relationship to	you		
			District		When	Case number,	if known		
			Debtor			Relationship to	you		
			District		When	Case number,	if known		
11.	Do you rent your	■ No	o. Go to li	ne 12.					
	residence?	□ Ye	<sub>es.</sub> Has yo	ur landlord obta	ained an eviction judgment	against you and do you want to sta	y in your residence?		
				No. Go to line	12.				
				Yes. Fill out Inbankruptcy pe		iction Judgment Against You (Form	n 101A) and file it with this		

Page 4 of 54 Document Case number (if known) Debtor 1 Stephanie A. Rector Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

### Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

Part 4:

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

■ No.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Stephanie A. Rector

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 54 Case number (if known) Debtor 1 Stephanie A. Rector Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ■ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **2**5,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Stephanie A. Rector Signature of Debtor 2 Stephanie A. Rector

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on October 4, 2016

MM / DD / YYYY

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Debtor 1 Stephanie A. Rector

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Case number (if known)

/s/ Timothy M. Hughes	6	Date	October 4, 2016
Signature of Attorney for D	)ebtor		MM / DD / YYYY
Timothy M. Hughes			
Printed name			
Lavelle Law, Ltd.			
Firm name			
501 W Colfax			
Palatine, IL 60067			
Number, Street, City, State & ZIP C	Code		
Contact phone <b>847.705-96</b>	698	Email address	thughes@lavellelaw.com
6208982			
Bar number & State			

	ase 10-62340	Doc 1 Filed 10/0		14/10 10.25.25	Desc Main
Fill in this info	rmation to identify you	ır case:			
Debtor 1	Stephanie A. Re	ector			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official Fo	orm 106Sum				

## Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	Amount	0.00 30,090.00 30,090.00 abilities
1c. Copy line 63, Total of all property on Schedule A/B	Your lia	30,090.00
2: Summarize Your Liabilities  Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	Your lia	abilities
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	Amount	
	Amount	
	<b>c</b>	
	\$	15,073.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	28,321.87
Your total liabilities	\$	43,394.87
3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,604.39
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,600.00
4: Answer These Questions for Administrative and Statistical Records		
Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	edules.
■ Yes What kind of debt do you have?		
	3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F

- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known) Debtor 1 Stephanie A. Rector

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 2,547.00 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	nim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	8,079.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	8,079.00

				Document	Page 10 of 54			
Fill in th	is inform	ation to identify your	case and	this filing:				
Debtor 1		Stephanie A. Red	ctor					
		First Name		ddle Name	Last Name			
Debtor 2								
(Spouse, if	filing)	First Name	Mı	ddle Name	Last Name			
United S	States Ban	kruptcy Court for the:	NORTH	ERN DISTRICT OF	ILLINOIS			
Casa nu	mh a r						_	
Case nu	mber							Check if this is an amended filing
								amended ming
Offici	<u>al For</u>	<u>m 106A/B</u>						
Sche	edule	A/B: Prop	ertv					12/15
n each ca think it fits nformatio Answer ev	ategory, se s best. Be on. If more very questi	parately list and describ as complete and accura space is needed, attach on.	pe items. Li ate as poss a separate	sible. If two married pe e sheet to this form. O	e. If an asset fits in more than eople are filing together, both on the top of any additional page.  U Own or Have an Interest In	are equally responsible	for supply	ing correct
Part I.	Describe E	acii Residence, Building	g, Lanu, or	Other Real Estate 10	u Own or have an interest in			
1. Do you	own or ha	ve any legal or equitabl	le interest i	in any residence, build	ding, land, or similar property?	?		
■ No	Go to Part 2	2						
_		the property?						
<b>—</b> 163.	. WHELE IS	ine property:						
Part 2:	Describe Y	our Vehicles						
3. <b>Cars,</b> □ No ■ Yes		cks, tractors, sport u	tility vehi	cles, motorcycles				
2.4 M	laka. <b>T</b> e	oyota		Who has an interest	in the preparty?	Do not deduct seco	ured claims	or exemptions. Put
	6	ienna		_	in the property? Check one	the amount of any	secured cla	ims on Schedule D: ecured by Property.
	——————————————————————————————————————	011		Debtor 1 only				
	pproximate		0123	☐ Debtor 2 only ☐ Debtor 1 and Debtor	or 2 only	Current value of t entire property?		rrent value of the ortion you own?
	ther informa		<u> </u>	At least one of the	•	oo proposity		,
Le	ocation:	521 Lincoln St,				*		
A	lgonquir	ı IL 60102		☐ Check if this is co	ommunity property	\$10,400	.00	\$10,400.00
				(see instructions)				
	oles: Boats				vehicles, other vehicles, ans, snowmobiles, motorcycle a			
					es from Part 2, including a			\$10,400.00
Part 3:	Describe Y	our Personal and Hous	sehold Item	ıs				
Do you	own or ha	ave any legal or equit	table inter	rest in any of the fo	llowing items?		<b>port</b> Do n	ent value of the ion you own? ot deduct secured as or exemptions.
		ods and furnishings	linar-	hina kitahan				
⊏xan	ipies. Ivialo	or appliances, furniture	, imens, c	riiria, kitchenware				

□ No
Official Form 106A/B Schedule A/B: Property

Debtor 1	Case 16-8 Stephanie A		Doc 1	Filed 10/04/16 Document	Entered 10/04/16 16:2 Page 11 of 54 Case number (	5:23	Desc Main
_	Describe	. 1100101				,	
<b>—</b> 165.	Describe						*****
		Househ	old goods	furniture, etc.			\$2,200.00
□No	les: Televisions a	phones, c	ameras, med	lia players, games	oment; computers, printers, scanners;	; music c	
		Househ	rold goods	Electronics			\$350.00
Exampl	bles of value les: Antiques and other collection				oks, pictures, or other art objects; star	mp, coin	, or baseball card collections;
		Books	& pictures				\$340.00
	Describe	Misc. s	ports equip	oment			\$100.00
■ No □ Yes.  11. Clothe Examp □ No	ples: Pistols, rifles  Describe			n, and related equipmen			
<b>–</b> 165.	Describe	Ol- (bin					¢2,000,00
		Clothin	<u>g</u>				\$2,000.00
□ No		welry, cost	ume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, watches,	, gems, ç	gold, silver
		Watche	es and cost	ume jewelry			\$300.00
Examµ □ No	orm animals bles: Dogs, cats, l		es	<u>,</u>			\$400.00
■ No	her personal and			u did not already list, i	ncluding any health aids you did no	ot list	

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15	. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	
	for Part 3. Write that number here	\$5,690.00
	rt 4: Describe Your Financial Assets	
Do	o you own or have any legal or equitable interest in any of the following?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
40	Cook	ciamic or exemplicates
16.	Cash  Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your peti  No  Yes	tion
	<u> </u>	
	Cash	\$50.00
17.	Deposits of money  Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage institutions. If you have multiple accounts with the same institution, list each.	houses, and other similar
	□ No ■ Yes	
	17.1. Checking 5/3 Bank	\$550.00
	Bonds, mutual funds, or publicly traded stocks  Examples: Bond funds, investment accounts with brokerage firms, money market accounts  No  Yes  Institution or issuer name:  Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an intere joint venture  No	st in an LLC, partnership, and
	☐ Yes. Give specific information about them	
20.	Government and corporate bonds and other negotiable and non-negotiable instruments  Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.  Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.  No	
	☐ Yes. Give specific information about them	
	Issuer name:	
21.	Retirement or pension accounts  Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing  □ No	g plans
	Yes. List each account separately.  Type of account:  Institution name:	
	Pension//401k//IRA	\$10,000.00
22.	Security deposits and prepayments  Your share of all unused deposits you have made so that you may continue service or use from a company  Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications compa  No	anies, or others
	Yes Institution name or individual:	
23.	Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)  ■ No	
	Yes Issuer name and description.	
Off	icial Form 106A/B Schedule A/B: Property	page 3

Debtor 1

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24.	Interests in an education IRA, in an acc 26 U.S.C. §§ 530(b)(1), 529A(b), and 529  No	ount in a qualified ABLE program, or under a qu(b)(1).	alified state tuition progran	n.
		d description. Separately file the records of any inter	ests.11 U.S.C. § 521(c):	
	Trusts, equitable or future interests in  ■ No  □ Yes. Give specific information about th	property (other than anything listed in line 1), an	d rights or powers exercisa	able for your benefit
	·	secrets, and other intellectual property		
	Examples: Internet domain names, webs	ites, proceeds from royalties and licensing agreeme	nts	
	Yes. Give specific information about the			
	■ No	enses, cooperative association holdings, liquor licer	ses, professional licenses	
	Yes. Give specific information about the oney or property owed to you?	em		Current value of the
IVI	oney or property owed to you?			portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you			
	<ul><li>☐ No</li><li>■ Yes. Give specific information about the</li></ul>	em, including whether you already filed the returns a	nd the tax years	
	·	, ,	·	
		Current year	Federal	\$350.00
		Current year	rederai	, <del>, , , , , , , , , , , , , , , , , , </del>
		Current year's	State	\$0.00
		Current year's Earned Income Credit	Federal	\$3,000.00
29.	Family support  Examples: Past due or lump sum alimon  No  Yes. Give specific information	y, spousal support, child support, maintenance, divo	rce settlement, property settl	ement
30.	benefits; unpaid loans you ma	rance payments, disability benefits, sick pay, vacatic ade to someone else	n pay, workers' compensatio	on, Social Security
31.	☐ Yes. Give specific information  Interests in insurance policies  Examples: Health, disability, or life insura	ance; health savings account (HSA); credit, homeow	ner's, or renter's insurance	
	□ No		5, 5. Torrer 5 modification	
	Yes. Name the insurance company of e Company n		nry:	Surrender or refund value:
	Term life	ins thru work		\$50.00

Official Form 106A/B Schedule A/B: Property page 4

Debtor 1

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Case number (if known) Document Stephanie A. Rector Debtor 1 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$14,000.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 ...... \$0.00 56. Part 2: Total vehicles, line 5 \$10,400.00 57. Part 3: Total personal and household items, line 15 \$5,690.00 58. Part 4: Total financial assets, line 36 \$14,000.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00

62. Total personal property. Add lines 56 through 61... \$30,090.00 Copy personal property total \$30,090.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$30,090.00

		17000000	III FAUE IJ UL.	)4	
Fill in this infor	rmation to identify your	case:			
Debtor 1	Stephanie A. Rec	tor			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is an
					amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own			Specific laws that allow exemption
\$10,400.00		\$2,400.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$2,200.00		\$2,200.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$350.00		\$350.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$340.00		\$340.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$100.00		\$100.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$10,400.00 \$2,200.00 \$350.00	\$100.00    Copy the value from Schedule A/B	\$10,400.00  \$10,400.00  \$2,400.00  \$2,400.00  \$2,400.00  \$2,400.00  \$2,400.00  \$2,200.00  \$2,200.00  \$2,200.00  \$2,200.00  \$350.00  \$350.00  \$350.00  \$350.00  \$340.00  \$340.00  \$100% of fair market value, up to any applicable statutory limit  \$340.00  \$340.00  \$100% of fair market value, up to any applicable statutory limit

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Case number (if known)

Debtor 1	Stephanie A. Rector	Document		Case number (if known)	
Brie Sch	ef description of the property and line on nedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	othing e from <i>Schedule A/B</i> : <b>11.1</b>	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(a)
				100% of fair market value, up to any applicable statutory limit	
	atches and costume jewelry e from Schedule A/B: 12.1	\$300.00		\$300.00	735 ILCS 5/12-1001(a)
				100% of fair market value, up to any applicable statutory limit	
	logs e from Schedule A/B: 13.1	\$400.00		\$400.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
Ca:	sh e from Schedule A/B: 16.1	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
	5 II 5 II 5 5 I 5 I 5 I 5 I 5 I 5 I 5 I			100% of fair market value, up to any applicable statutory limit	
	ecking: 5/3 Bank e from Schedule A/B: 17.1	\$550.00		\$550.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
	nsion//401k//IRA e from Schedule A/B: 21.1	\$10,000.00		\$10,000.00	735 ILCS 5/12-704
Liii	e nom concade // E. = · · ·			100% of fair market value, up to any applicable statutory limit	
	deral: Current year e from Schedule A/B: 28.1	\$350.00		\$350.00	735 ILCS 5/12-1001(b)
LIII	e IIIIII <i>Schedule A/B.</i> <b>25.1</b>			100% of fair market value, up to any applicable statutory limit	
	deral: Current year's Earned	\$3,000.00		\$3,000.00	735 ILCS 5/12-1001(g)(1)
	e from Schedule A/B: 28.3			100% of fair market value, up to any applicable statutory limit	
	rm life ins thru work e from Schedule A/B: 31.1	\$50.00		\$50.00	215 ILCS 5/238
	5 II 5 II 5 5 I 5 I 5 I 5 I 5 I 5 I 5 I			100% of fair market value, up to any applicable statutory limit	
	e you claiming a homestead exemption abject to adjustment on 4/01/19 and every No			led on or after the date of adjustmen	ıt.)
	Yes. Did you acquire the property covered No	ed by the exemption wi	thin 1	,215 days before you filed this case?	?
	□ Ves				

Ca	se 16-82340	Doc 1 Filed 10/04/16  Document F	Entered 2age 17	of 54	25:23 Desc N	iain
Fill in this inform	nation to identify you			()1 .)4		
Debtor 1	Stephanie A. R	ector				
	First Name		ast Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name L	ast Name			
	nkruptcy Court for the					
•						
Case number (if known)					☐ Check	if this is an
					_	led filing
Official Form	106D					
		s Who Hove Claims S	oourod	l by Droport		40/45
Schedule	D: Creditors	s Who Have Claims Se	<u>ecurea</u>	by Property	у	12/15
		If two married people are filing together, out, number the entries, and attach it to the				
number (if known).						
	have claims secured b					
_		this form to the court with your other so	nedules. Yo	u have nothing else to	o report on this form.	
	all of the information	below.				
	I Secured Claims			Column A	Column B	Column C
for each claim. If me	ore than one creditor has	more than one secured claim, list the creditors a particular claim, list the other creditors in ical order according to the creditor's name.		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	·	ical order according to the creditor 3 harrie.		value of collateral.	claim	If any
2.1   Toyota Fir	nanciai	Describe the property that secures the	claim:	\$15,073.00	\$10,400.00	\$4,673.00
Creditor's Name	9	2011 Toyota Sienna 130123 mi	les			
Toyota Fir	nancial	Location: 521 Lincoln St, Algo	nquin			
Services	200	IL 60102 As of the date you file, the claim is: Che	eck all that			
Po Box 80 Cedar Rar	oids, IA 52409	apply.				
	, City, State & Zip Code	☐ Contingent ☐ Unliquidated				
rumber, encet,	, Oity, State & Zip Oodo	☐ Disputed				
Who owes the de	bt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mo	rtgage or seci	ured		
Debtor 2 only		car loan)	0 0			
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mecha	ınic's lien)			
☐ At least one of the	ne debtors and another	☐ Judgment lien from a lawsuit				
Check if this cla		Other (including a right to offset)				
	Opened					
	06/15 Last					
Date debt was incu	Active 8/02/16	Last 4 digits of account number	0001			

\$15,073.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$15,073.00

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	0000 10 02040 000	Document	Page 18 of 54	Desc Main
Fill i	n this information to identify your case			
Debt	or 1 Stephanie A. Rector			
	First Name	Middle Name	Last Name	
Debt	or 2 se if, filing) First Name	Middle Name	Last Name	
` '				
Unite	ed States Bankruptcy Court for the: NC	PRTHERN DISTRICT OF ILL	INOIS	
Case	e number			
(if knov	wn)			☐ Check if this is an
				amended filing
Offic	cial Form 106E/F			
	nedule E/F: Creditors Who	Have Unsecured	Claims	12/15
Sched Sched eft. At	lule G: Executory Contracts and Unexpired I lule D: Creditors Who Have Claims Secured ttach the Continuation Page to this page. If y and case number (if known).	Leases (Official Form 106G). Do by Property. If more space is n rou have no information to rep	st executory contracts on Schedule A/B: Property ( o not include any creditors with partially secured of leeded, copy the Part you need, fill it out, number to ort in a Part, do not file that Part. On the top of any	claims that are listed in the entries in the boxes on the
Part				
_	o any creditors have priority unsecured cla ■	ms against you?		
	No. Go to Part 2.			
	☐ Yes.  2: List All of Your NONPRIORITY Ur	account Claims		
Part	Oo any creditors have nonpriority unsecured			
		• •		
	$\operatorname{\square}$ No. You have nothing to report in this part. S	ubmit this form to the court with y	our other schedules.	
	Yes.			
u th	insecured claim, list the creditor separately for e	ach claim. For each claim listed,	e creditor who holds each claim. If a creditor has mo identify what type of claim it is. Do not list claims alrea ave more than three nonpriority unsecured claims fill o	ady included in Part 1. If more
				Total claim
4.1	Algonquin Area Public Library	Last 4 digits of acco	ount number	\$0.00
	Nonpriority Creditor's Name	When was the debt	inquired?	
	115 Eastgate Dr. Algonquin, IL 60102	When was the debt		
	Number Street City State Zlp Code	As of the date you fi	ile, the claim is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	<u></u>	TY unsecured claim:	
	☐ Check if this claim is for a communit debt	<u> </u>		
	Is the claim subject to offset?	Obligations arising report as priority clain	g out of a separation agreement or divorce that you did ns	d not
	■ No		or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	ost books	
		— Other, Specify		

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Debtor 1 Stephanie A. Rector Case number (if know) 4.2 AT & T Wireless \$0.00 Last 4 digits of account number Nonpriority Creditor's Name P.O.Box 6428 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utility ☐ Yes AT&T 4.3 Last 4 digits of account number \$0.00 Nonpriority Creditor's Name **POB 5080** When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Utility Other. Specify 4.4 Atq Credit Llc 3378 \$74.00 Last 4 digits of account number Nonpriority Creditor's Name 1700 W Cortland St When was the debt incurred? **Opened 06/10** Ste 2 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Shah Medical** Other. Specify Associates Llc ☐ Yes

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Debtor 1 Stephanie A. Rector Case number (if know) Campion, Curran, Dunlop, Lamb & 3667 \$7,917.50 4.5 Last 4 digits of account number Cun Nonpriority Creditor's Name 8600 US Highway 14 When was the debt incurred? Suite 201 Crystal Lake, IL 60012 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify Legal Fees ☐ Yes 4.6 Cda/Pontiac 7497 \$494.00 Last 4 digits of account number Nonpriority Creditor's Name **Opened 02/11** Attn:Bankruptcy When was the debt incurred? Po Box 213 Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Wellington Radiology ☐ Yes Other. Specify Gsr 4.7 Last 4 digits of account number \$0.00 Centegra Hospital Nonpriority Creditor's Name 4201 W. Medical Center Dr. When was the debt incurred? McHenry, IL 60050 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Medical

Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Stephanie A. Rector Case number (if know) 4.8 \$245.00 Convergent Outsoucing, Inc Last 4 digits of account number 5602 Nonpriority Creditor's Name Po Box 9004 When was the debt incurred? Renton, WA 98057 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify 11 Comcast ☐ Yes **ERC/Enhanced Recovery Corp** 4.9 Last 4 digits of account number 5338 \$1,196.00 Nonpriority Creditor's Name 8014 Bayberry Rd When was the debt incurred? **Opened 09/13** Jacksonville, FL 32256 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Sprint ☐ Yes 4.1 **ERC/Enhanced Recovery Corp** 1300 \$40.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 8014 Bayberry Rd When was the debt incurred? **Opened 11/13** Jacksonville, FL 32256 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Collection Attorney Tmobile

Page 22 of 54 Case number (if know) Document Debtor 1 Stephanie A. Rector 4.1 \$4,986.00 **Fed Loan Servicing** 0002 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/13 Last Active Po Box 69184 When was the debt incurred? 7/26/16 Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 Fed Loan Servicing 0001 \$3,093.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/13 Last Active Po Box 69184 When was the debt incurred? 7/26/16 Harrisburg, PA 17106 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify Educational 4.1 **Gary Lechner** 1025 \$1,100.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 1408 Zimmerman Rd When was the debt incurred? Woodstock, IL 60098 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

□ Debts to pension or profit-sharing plans, and other similar debts
□ Other. Specify James Street lease Eviction judgment

Debtoi	T1 Stephanie A. Rector	Document Page 23 of 54 Case number (if know)	
4.1	Good Shepard Hospital	Last 4 digits of account number	\$0.00
4	Nonpriority Creditor's Name 450 W Highway 22	When was the debt incurred?	<del></del>
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	-
4.1	Illinois Secretary of State	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name Vehicle Services 501 S. 2nd St., Room 312 Springfield, IL 62756	When was the debt incurred? 4-29-2016	-
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	■ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Car accident	_
4.1	Illinois Secretary of State		\$0.00
6	Nonpriority Creditor's Name	Last 4 digits of account number	φυ.υυ
	Driver Services 17 N State St., #1100	When was the debt incurred? 4-29-2016	-
	Chicago, IL 60602  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	

■ No

☐ Yes

■ Other. Specify Car accident

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts Case 16-82340 Doc 1 Filed 10/04/16 Entered 10/04/16 16:25:23 Desc Main Document Page 24 of 54

Debtor 1 Stephanie A. Rector Case number (if know) 4.1 **Katrina Shedor** 5266 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Wilber & Associates, P.C. When was the debt incurred? 4-29-2016 210 Landmark Dr. Normal, IL 61761 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Car accident - \$6,698.37 ☐ Yes 4.1 **Matt Shedor** 5266 \$6,698.37 Last 4 digits of account number 8 Nonpriority Creditor's Name c/o Wilber & Associates, P.C. 4-29-2016 When was the debt incurred? 210 Landmark Dr. Normal, IL 61761 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ☐ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Car accident ☐ Yes 4.1 Mercy Health System \$0.00 9 Last 4 digits of account number Nonpriority Creditor's Name 1000 Mineral Point Ave When was the debt incurred? Janesville, WI 53548 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Medical

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Debto	Stephanie A. Rector	Case number (if know)	
4.2	Mercy McHenry Medical Center  Nonpriority Creditor's Name 3922 Mercy Dr McHenry, IL 60050  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical	bu did not
4.2	Navy Fcu	Last 4 digits of account number	\$1,131.00
	Nonpriority Creditor's Name  Po Box 3700  Merrifield, VA 22119	When was the debt incurred?  Opened 1/05/07 Last A 1/06/12	ctive
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that ye report as priority claims	ou did not
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No	Other. Specify  Credit Card	
		— Other. Openiny	
4.2	Northern Illinois Medical Center  Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	4201 W. Medical Center Dr McHenry, IL 60050	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that ye report as priority claims	ou did not
	No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Medical	
	<b>□</b> 100	Other. Specify	

	0000 10 02040	Document Dags 26 of E4	ani
Debtor	Stephanie A. Rector	Document Page 26 of 54 Case number (if know)	
4.2	Office of the Secretary of State	Last 4 digits of account number	\$0.00
0	Nonpriority Creditor's Name Mandatory Insurance Division 429 Howlett Building Springfield, IL 62756-7000	When was the debt incurred? 4-29-2016	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Car accident	
4.2	Pinnacle Credit Services	Last 4 digits of account number 0013	\$542.00
	Nonpriority Creditor's Name Po Box 640 Hopkins, MN 55343	When was the debt incurred? Opened 04/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.2	Pinnacle Credit Services	Last 4 digits of account number 0001	\$542.00
	Nonpriority Creditor's Name Po Box 640 Hopkins, MN 55343	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	

debt

■ No ☐ Yes report as priority claims

 $\hfill \Box$  Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify 12 Verizon Wireless Cellco Partne

Is the claim subject to offset?

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or 1 Stephanie A. Rector	Case number (if know)	
Sherman Hospital	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name 35134 Eagle Way	When was the debt incurred?	<u> </u>
Chicago, IL 60678-1351  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam is. Of each air that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical	
Stanislaus Credit Control Service,	Last 4 digits of account number 28N1	\$137.0
Inc. Nonpriority Creditor's Name	Last 4 digits of account number	Ψ107.0
Po Box 480	When was the debt incurred?	
Modesto, CA 95353	A control of the cont	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	П	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Cepamerica	
Stanislaus Credit Control Service,		
Inc.	Last 4 digits of account number 16N1	\$126.0
Nonpriority Creditor's Name		
Po Box 480	When was the debt incurred?	
Modesto, CA 95353  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The strain year may and channel consort an anal apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Cepamerica	

### Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Stephanie A. Rector

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 8,079.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 20,242.87
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 28,321.87

		1200000		
Fill in this infor	rmation to identify your	case:		
Debtor 1	Stephanie A. Rec	tor		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if thi
				amended f

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>-</del>
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	•				
	Name				
	Number	Street			<del>-</del>
	City		State	ZIP Code	
2.5	-		·		
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
	,		<b>0.</b> 0		

		Documen	t Page 30 of	<u>f 54                                    </u>	
Fill in this info	rmation to identify your	case:			
Debtor 1	Stephanie A. Rec	tor			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT O	F ILLINOIS		
Case number (if known)				☐ Check if this is an amended filing	
	orm 106H • H: Your Code	ebtors		12/15	
people are filing ill it out, and no your name and 1. Do you l	g together, both are equa umber the entries in the case number (if known).	ally responsible for supply	ing correct information ne Additional Page to t	s complete and accurate as possible. If two married on. If more space is needed, copy the Additional Page of this page. On the top of any Additional Pages, write as a codebtor.	٠,
☐ No					
Yes					
		lived in a community prop Nevada, New Mexico, Puerl		? (Community property states and territories include ngton, and Wisconsin.)	
■ No. Go t	o line 3.				
_		ise, or legal equivalent live w	vith you at the time?		
in line 2 ag	pain as a codebtor only it ), Schedule E/F (Official	that person is a guaranto	r or cosigner. Make su	if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offici 6G). Use Schedule D, Schedule E/F, or Schedule G to f	al
	mn 1: Your codebtor Number, Street, City, State and ZII	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:	
	t Schwartz Homeless/Rehab			☐ Schedule D, line  ■ Schedule E/F, line4.18 ☐ Schedule G  Matt Shedor	

Schedule H: Your Codebtors

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<b>F</b> :II	in this information to identify, your a								
	in this information to identify your captor 1 Stephanie A								
	otor 2  ouse, if filing)				_				
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS						
Case number (If known)						Check if this is:  An amended filing  A supplement showing postpetition chapte 13 income as of the following date:			
	fficial Form 106l chedule I: Your Ince	- 100				MM / DI	D/ YYYY		12/1
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not fili r spouse is not filing wi	ng jointly, and your s th you, do not includ	pouse i e infori	is livin matior	ig with you, i n about your	nclude infoi spouse. If n	rmation ab	out your e is needed,
1.	Fill in your employment information.		Debtor 1			Debt	or 2 or non-	filing spou	ıse
	If you have more than one job,	Employment status	■ Employed			☐ Er	☐ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed		☐ Not employed				
	employers.	Occupation	Nurse						
	Include part-time, seasonal, or self-employed work.	Employer's name	Elgin Internal Medical Assoc			<u> </u>			
	Occupation may include student or homemaker, if it applies.	Employer's address	745 Fletcher Dr # Elgin, IL 60123	‡101					
		How long employed to	here? 12 years	i					
Par	Give Details About Mor	thly Income							
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to re	port for	any lin	ne, write \$0 in	the space. Ir	nclude your	: non-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	employ	ers for that pe	rson on the	lines below	ı. If you need
					F	For Debtor 1		ebtor 2 or iling spous	se
2.	List monthly gross wages, salar deductions). If not paid monthly, or			2.	\$_	1,788.8	<b>0</b> \$	N	I/A
3.	Estimate and list monthly overti	ime pay.		3.	+\$_	0.0	<u> </u>	N	<u>I/A</u>

1,788.80

N/A

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Stephanie A. Rector	-	(	Case	number (if know	7)				
						Debtor 1		non-f	ebtor iling s	pouse	
	Cop	by line 4 here	4.		\$_	1,788.8	0_	\$		N/A	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	242.4	1	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b	b.	\$_	0.0	0	\$		N/A	
	5c.	Voluntary contributions for retirement plans	50		\$_	0.0	0	\$		N/A	
	5d.	Required repayments of retirement fund loans	50		\$_	0.0	_	\$		N/A	
	5e.	Insurance	56		\$_	0.0	_	\$		N/A	<b>=</b>
	5f.	Domestic support obligations Union dues	5f		\$ \$	0.0	_	\$		N/A	
	5g. 5h.	Other deductions. Specify:	5( 5l	y. h.+	\$ -	0.0		+ \$—		N/A N/A	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		* – \$	242.4	_			N/A	=
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		Ψ – \$	1,546.3		\$ 		N/A	-
			٠.		Ψ _	1,346.3	9	Ψ		IN/A	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88	a.	\$	0.0	0	\$		N/A	
	8b.	Interest and dividends	81	b.	\$_	0.0	0	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			•		_	Φ.			
	0-1	settlement, and property settlement.	80		\$ _	638.0	_	\$		N/A	
	8d. 8e.	Unemployment compensation Social Security	80 86		\$_ \$	0.0		\$		N/A N/A	
	8f.	Other government assistance that you regularly receive	00	<b>.</b>	Ψ_	0.0	_	Ψ		IN/A	-
	<b></b>	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			¢	420.0	•	¢.		NI/A	
	8g.	Specify: WIC/Food stamps Pension or retirement income	— 8f — 8ე		\$ \$	120.0 0.0		\$		N/A N/A	-
	8h.	Other monthly income. Specify: Family support for car note		y. h.+	<b>\$</b> -	300.0		· —		N/A	
	· · · ·	Turniy Support for Sur Hote				000.0	_			1473	¬
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [	\$	1,058.0	0	\$		N/A	<u>\</u>
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		2,604.39 +	\$		N/A	= \$	2,604.39
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				2,00 1100	· -				_,,
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	dep			•			chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	2,604.39
13.	Do.	you expect an increase or decrease within the year after you file this form	2						,	Combin monthly	ned y income
10.		No.	•								

Official Form 106I Schedule I: Your Income page 2

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Fill	in this informat	ion to identify yo	our case:					
Deb	otor 1	Stephanie A	. Rector			Check	c if this is:	
Deb	otor 2					_	An amended filing  A supplement show	ving postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	
Unit	United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS						MM / DD / YYYY	
	e number							
(If k	nown)							
O	fficial Fo	rm 106J						
S	chedule	J: Your	Exper	ises				12/15
Be info	as complete a ormation. If mo	nd accurate as	possible eded, atta	If two married people ar ch another sheet to this				
Par 1.	t 1: Descri	be Your House t case?	hold					
	No. Go to	line 2.	in a separ	ate household?				
	□ No □ Ye		st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Debto	or 2.	
2.	Do you have	dependents?	□ No					
	Do not list De Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state t				•			□ No
	dependents r	names.			Son			■ Yes □ No
					Daughter			■ Yes
					Son			□ No ■ Yes
								■ Yes □ No
3.	Do your exp	enses include	_					☐ Yes
0.	expenses of	people other to your depende	han $_{m \Box}$	No Yes				
Est exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		assistance an		government assistance i luded it on <i>Schedule I:</i> Y			Your expe	enses
4.		r home owners d any rent for th		ses for your residence. In	nclude first mortgage	e 4. \$		1,000.00
	If not include	ed in line 4:						
	4a. Real es	state taxes				4a. \$		0.00
	4b. Proper	ty, homeowner's				4b. \$		0.00
				ipkeep expenses		4c. \$		0.00
5.		owner's associat nortgage payme		dominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00

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Debtor '	Stephanie A. Rector	Case num	ber (if known)	
6. Uti	lities:			
6a.		6a.	\$	150.00
6b.		6b.	\$	30.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	90.00
6d.		6d.	·	0.00
	od and housekeeping supplies	— 7.	\$	295.00
	ildcare and children's education costs	8.	\$	0.00
	thing, laundry, and dry cleaning	9.		115.00
	sonal care products and services	10.	·	20.00
	dical and dental expenses	11.	· :	50.00
	insportation. Include gas, maintenance, bus or train fare.		<u> </u>	30.00
	not include car payments.	12.	\$	275.00
	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	aritable contributions and religious donations	14.		10.00
	urance.			
	not include insurance deducted from your pay or included in lines 4 or 20.			
15	a. Life insurance	15a.	\$	0.00
15	o. Health insurance	15b.	\$	200.00
150	c. Vehicle insurance	15c.	\$	65.00
150	d. Other insurance. Specify:	15d.	\$	0.00
16. <b>Ta</b> :	<b>kes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.			
	ecify:	16.	\$	0.00
17. <b>Ins</b>	tallment or lease payments:			
17	a. Car payments for Vehicle 1	17a.	\$	300.00
17	o. Car payments for Vehicle 2	17b.	\$	0.00
170	c. Other. Specify:	17c.	\$	0.00
170	I. Other. Specify:	17d.	\$	0.00
18. <b>Yo</b>	ur payments of alimony, maintenance, and support that you did not report as			
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19. <b>Ot</b> l	ner payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.		
	ner real property expenses not included in lines 4 or 5 of this form or on Sche			
	a. Mortgages on other property	20a.		0.00
201	o. Real estate taxes	20b.	·	0.00
200	c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
200	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20	e. Homeowner's association or condominium dues	20e.	\$	0.00
21. <b>Ot</b> l	ner: Specify:	21.	+\$	0.00
00 0-				
	culate your monthly expenses		•	
	a. Add lines 4 through 21.		\$	2,600.00
	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
220	c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,600.00
33 <b>Ca</b>	culate your monthly net income.			
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	¢	2 604 20
	Copy your monthly expenses from line 22c above.	23b.		2,604.39
231	b. Copy your monthly expenses from the 22c above.	230.	-φ	2,600.00
22	c. Subtract your monthly expenses from your monthly income.			
230	The result is your monthly net income.	23c.	\$	4.39
	The result is your monthly not income.			
24. <b>Do</b>	you expect an increase or decrease in your expenses within the year after yo	u file this	form?	
For	example, do you expect to finish paying for your car loan within the year or do you expect your			or decrease because of a
mo	dification to the terms of your mortgage?			
	No.			
	Yes. Explain here:			

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Fill in this info	rmation to identify your	case:			
Debtor 1	Stephanie A. Rec				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
,					
United States B	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
<u> </u>					amended filing
Official For	10CD				
Official For	-				
Declara	tion About a	an Individual	Debtor's So	chedules	12/15
,	18 U.S.C. §§ 152, 1341, 1 gn Below				
Did you p	ay or agree to pay some	eone who is NOT an attor	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankrup	otcy Petition Preparer's Notice.
				,	nd Signature (Official Form 119)
	alty of perjury, I declare are true and correct.	that I have read the sumi	mary and schedules file	ed with this declaration a	and
X /s/ St	ephanie A. Rector		X		
	nanie A. Rector		Signature of	f Debtor 2	
	ure of Debtor 1		-		

Date \_\_\_\_\_

Date October 4, 2016

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Fill in this information to identify yo	ur case:			
Debtor 1 Stephanie A. R First Name	ector  Middle Name	Last Name		
Debtor 2	Wilde Name	Last Name		
(Spouse if, filing) First Name	Middle Name	Last Name		
United States Bankruptcy Court for the	NORTHERN DISTRICT C	OF ILLINOIS		
Case number				
(if known)			_	Check if this is an
				amended filing
0				
Official Form 107			_	
Statement of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/10
Be as complete and accurate as posinformation. If more space is needed				
number (if known). Answer every que	•	uns form. On the top of an	y additional pages, write yo	our name and case
Part 1: Give Details About Your M	larital Status and Where You	Lived Before		
What is your current marital star	tus?			
☐ Married				
Not married				
2. During the last 3 years, have yo	u lived anywhere other than v	where you live now?		
□ No				
Yes. List all of the places you	lived in the last 3 years. Do no	ot include where you live now	I.	
Debtor 1 Prior Address:	Dates Debtor 1	Debtor 2 Prior Ac	ldress:	Dates Debtor 2
	lived there	200001211101710		lived there
11985 OCEOLA DR Algonquin, IL 60102	From-To: <b>2011-2014</b>	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
Algoriquiii, iL 00102	2011 2011			110111110.
3. Within the last 8 years, did you of states and territories include Arizona, C  No Yes. Make sure you fill out So		vada, New Mexico, Puerto R		
Part 2 Explain the Sources of Yo	ur Income			
<ol> <li>Did you have any income from e Fill in the total amount of income y If you are filing a joint case and yo</li> </ol>	ou received from all jobs and a	all businesses, including part	-time activities.	endar years?
□ No				
Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income	Gross income	Sources of income	Gross income
	Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$13,668.43	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	

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Debtor 1 Stephanie A. Rector

	Debtor 1		Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
For last calendar year: (January 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$9,682.00	☐ Wages, commissions, bonuses, tips		
	☐ Operating a business		☐ Operating a business		
	☐ Wages, commissions, bonuses, tips	\$6,455.00	☐ Wages, commissions, bonuses, tips		
	Operating a business		☐ Operating a business		
For the calendar year before that: (January 1 to December 31, 2014)	■ Wages, commissions, bonuses, tips	\$634.00	☐ Wages, commissions, bonuses, tips		
	☐ Operating a business		☐ Operating a business		
	☐ Wages, commissions, bonuses, tips	\$2,781.00	☐ Wages, commissions, bonuses, tips		
	Operating a business		☐ Operating a business		

Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

□ No

Yes. Fill in the details.

	Debtor 1		Debtor 2		
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)	
From January 1 of current year until the date you filed for bankruptcy:	Child Support	\$5,742.00			
	Public aid	\$1,080.00			
For last calendar year: (January 1 to December 31, 2015)	Child Support	\$7,656.00			
	Public aid	\$1,440.00			
For the calendar year before that: (January 1 to December 31, 2014)	Child Support	\$7,656.00			
	Public aid	\$1,440.00			

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Case number (if known) Document Debtor 1 Stephanie A. Rector

_	No.	Provided the service of the service					
		During the	90 days before you file	ed for bankruptcy, did you p	ay any creditor a tota	al of \$6,425* or mo	re?
		□ No.	Go to line 7.				
		□ Yes	paid that creditor. Do not include payments	not include payments for d to an attorney for this ban	omestic support obli kruptcy case.	gations, such as cl	yments and the total amount you nild support and alimony. Also, do
		* Subject	to adjustment on 4/01/	19 and every 3 years after t	hat for cases filed or	n or after the date o	of adjustment.
	Yes.			ed for bankruptcy, did you p		al of \$600 or more	?
		□ No.	Go to line 7.				
		■ Yes		domestic support obligatio			you paid that creditor. Do not Also, do not include payments to
Cre	ditor's	s Name an	d Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
		inancial	Services	Monthly car note	\$0.00	\$14,000.00	☐ Mortgage
_		< 5855	20407	payment of \$295.00			■ Car
Car	roi St	ream, IL (	00197	<b>\$</b> 295.00			☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
				artners: relatives of any go	oral partners: partner	orobino of which we	was an insider?
	hich yo siness	ou are an of	ficer, director, person in	artners; relatives of any gent control, or owner of 20%	neral partners; partners partners or more of their votin	erships of which yog g securities; and a	ou are a general partner; corpora
a bus alimo	hich yo siness	ou are an of	ficer, director, person in	artners; relatives of any gent control, or owner of 20%	neral partners; partners partners or more of their votin	erships of which yog g securities; and a	ou are a general partner; corporat ny managing agent, including one
a bus	hich yo siness ony. No Yes. I	ou are an of you opera	fficer, director, person in te as a sole proprietor. nents to an insider.	artners; relatives of any gen n control, or owner of 20% 11 U.S.C. § 101. Include pa	neral partners; partners partners or more of their votin	erships of which yog g securities; and a s support obligation	ou are a general partner; corporat ny managing agent, including one
a bus	hich yo siness ony. No Yes. I	ou are an of	fficer, director, person in te as a sole proprietor. nents to an insider.	artners; relatives of any gent control, or owner of 20%	neral partners; partners partners or more of their votin	erships of which yog g securities; and a	ou are a general partner; corporat ny managing agent, including one
a bus alimo	hich your siness ony.  No Yes. I ider's inin 1 your der?	ou are an of you operate ist all payr Name and ear before	fficer, director, person in the as a sole proprietor.  nents to an insider.  Address  you filed for bankrup	artners; relatives of any gen control, or owner of 20% of 11 U.S.C. § 101. Include partners of payment  Dates of payment  tcy, did you make any page	neral partners; partners more of their votin ayments for domestic ayments for domestic amount paid	erships of which yog securities; and a support obligation  Amount you still owe	ou are a general partner; corporating managing agent, including one s, such as child support and  Reason for this payment
a bus alimo	hich your siness ony.  No Yes. I ider's inin 1 you der? ude pay	List all payr Name and ear before	fficer, director, person in the as a sole proprietor.  nents to an insider.  Address  you filed for bankrup debts guaranteed or co	artners; relatives of any gen control, or owner of 20% of 11 U.S.C. § 101. Include partners of payment  Dates of payment  tcy, did you make any page	neral partners; partners more of their votin ayments for domestic ayments for domestic amount paid	erships of which yog securities; and a support obligation  Amount you still owe	ou are a general partner; corporat ny managing agent, including one is, such as child support and
a bus alimo	hich your siness ony.  No Yes. I ider's inin 1 you der? ude pay	List all payr Name and ear before	fficer, director, person in the as a sole proprietor.  nents to an insider.  Address  you filed for bankrup	artners; relatives of any gen control, or owner of 20% of 11 U.S.C. § 101. Include partners of payment  Dates of payment  tcy, did you make any page	neral partners; partners more of their votin ayments for domestic ayments for domestic amount paid	erships of which yog securities; and a support obligation  Amount you still owe	ou are a general partner; corporating managing agent, including one is, such as child support and  Reason for this payment
a bus alimo	No Yes. I ider's ide pay No Yes. I	List all payr Name and ear before	fficer, director, person in the as a sole proprietor.  nents to an insider.  Address  you filed for bankrup debts guaranteed or connents to an insider	artners; relatives of any gen control, or owner of 20% of 11 U.S.C. § 101. Include partners of payment  Dates of payment  tcy, did you make any page	neral partners; partners more of their votin ayments for domestic ayments for domestic amount paid	erships of which yog securities; and a support obligation  Amount you still owe	ou are a general partner; corporating managing agent, including one is, such as child support and  Reason for this payment
a bus alimo	No Yes. L ider's No Yes. L ider's Ide pay No Yes. L ider's	List all payr Name and ear before yments on List all payr Name and	fficer, director, person in the as a sole proprietor.  nents to an insider.  Address  you filed for bankrup debts guaranteed or connents to an insider.  Address	artners; relatives of any gen control, or owner of 20% of 11 U.S.C. § 101. Include part Dates of payment  tcy, did you make any paysigned by an insider.	neral partners; partners more of their votin ayments for domestic to the form of the form	erships of which yog securities; and a support obligation  Amount you still owe  any property on a	ru are a general partner; corporating managing agent, including ones, such as child support and  Reason for this payment  ccount of a debt that benefited  Reason for this payment
a bus alimo	No Yes. Lider's Ide pay No Yes. Lider's Ide pay No Yes. Lider's Iden's	List all payr Name and ear before yments on List all payr Name and tiffy Legal ear before h matters, i	fficer, director, person in the as a sole proprietor.  nents to an insider.  Address  you filed for bankrup debts guaranteed or connents to an insider  Address  Actions, Repossessic you filed for bankrup	artners; relatives of any gen control, or owner of 20% of 11 U.S.C. § 101. Include partners of payment  Dates of payment  tcy, did you make any paysigned by an insider.  Dates of payment	Total amount paid	erships of which yog securities; and a c support obligation  Amount you still owe any property on a Amount you still owe still owe	rative proceeding?
a bus alimo	No Yes. Lider's No Yes. Lider's Iden's Iden's Iden's No Yes. Lider's Iden's Iden No No No	List all payr Name and ear before yments on List all payr Name and etify Legal ear before h matters, ins, and cor	fficer, director, person in the as a sole proprietor.  In the as a	Dates of payment  Dates of payment  Dates of payment  Dates of payment  tcy, did you make any pay signed by an insider.  Dates of payment  ons, and Foreclosures  tcy, were you a party in a	Total amount paid	erships of which yog securities; and a c support obligation  Amount you still owe any property on a Amount you still owe still owe	rative proceeding?
a bus alimo	No Yes. Lider's No Yes. Lider's Iden's Iden's Iden's No Yes. Lider's Iden's Iden No No No	List all payr Name and ear before yments on List all payr Name and eitify Legal ear before h matters, ins, and con	fficer, director, person in the as a sole proprietor.  In the as a	Dates of payment  Dates of payment  Dates of payment  Dates of payment  tcy, did you make any pay signed by an insider.  Dates of payment  ons, and Foreclosures  tcy, were you a party in a	Total amount paid	Amount you still owe  Amount you still owe  Amount you still owe  any property on a	rative proceeding?

Case 16-82340 Doc 1 Filed 10/04/16 Entered 10/04/16 16:25:23 Desc Main Page 39 of 54 Document Case number (if known) Debtor 1 Stephanie A. Rector Case title Status of the case Nature of the case Court or agency Case number □ Pending □ On appeal □ Concluded Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Value Dates you more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code)

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No

Yes. Fill in the details.

Describe the property you lost and how the loss occurred

Describe any insurance coverage for the loss

Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

Date of your loss

Value of property lost

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Debtor 1 Stephanie A. Rector

Part 7:	List Certain	<b>Payments</b>	or	<b>Transfers</b>

Par	List Certain Payments or Transfers						
16.	Within 1 year before you filed for bankruptcy, d consulted about seeking bankruptcy or prepari Include any attorneys, bankruptcy petition preparer	ng a bankruptcy peti	ition?			ty to anyone you	
	□ No						
	<u> </u>						
	Yes. Fill in the details.				_		
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and vertransferred	alue of any propert	·y	Date payment or transfer was made	Amount of payment	
	Lavelle Law, Ltd. 501 W Colfax Palatine, IL 60067 www.lavellelaw.com Mother				9/2016	\$1,500.00	
<b>7</b> .	Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors of Do not include any payment or transfer that you list	r to make payments			transfer any proper	ty to anyone who	
	Yes. Fill in the details.						
	Person Who Was Paid Address	Description and vertransferred	alue of any propert	y	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin include both outright transfers and transfers made include gifts and transfers that you have already list.  No  Yes. Fill in the details.	ness or financial affa as security (such as the	irs? ne granting of a sect				
	Person Who Received Transfer Address	Description and va property transferr			ny property or received or debts hange	Date transfer was made	
	Person's relationship to you						
19.	Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protect ■ No □ Yes. Fill in the details.		y property to a self	-settled tru	st or similar device o	of which you are a	
	Name of trust	Description and va	alue of the propert	y transferre	ed	Date Transfer was	
						made	
Par	t 8: List of Certain Financial Accounts, Instru	ments, Safe Deposit	Boxes, and Storag	je Units			
20.	<ul> <li>Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?</li> <li>Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.</li> <li>□ No</li> <li>■ Yes. Fill in the details.</li> </ul>						
	Name of Financial Institution and La	st 4 digits of	Type of account of	or Det	e account was	Last balance	
		count number	instrument	clos	e account was sed, sold, ved, or asferred	before closing or transfer	

Case 16-82340 Doc 1 Filed 10/04/16 Entered 10/04/16 16:25:23 Desc Main Page 41 of 54 Case number (if known) Document Debtor 1 Stephanie A. Rector Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred XXXX-5/3 Bank 2016 \$0.00 Checking Algonquin, IL 60102 □ Savings ☐ Money Market ☐ Brokerage Other 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No П Yes. Fill in the details. Owner's Name Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

Official Form 107

Address (Number, Street, City, State and

Governmental unit

ZIP Code)

Address (Number, Street, City, State and ZIP Code)

☐ Yes. Fill in the details.

Name of site

Date of notice

Environmental law, if you

know it

Case 16-82340 Doc 1 Filed 10/04/16 Entered 10/04/16 16:25:23 Document Page 42 of 54 ase number (*if known*) Debtor 1 Stephanie A. Rector 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Stephanie A. Rector Signature of Debtor 2 Stephanie A. Rector Signature of Debtor 1 Date October 4, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Case number (if known) Document

Debtor 1 Stephanie A. Rector

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Fill in this infor	mation to identify your o	ase:			
Debtor 1	Stephanie A. Rect				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
					amondod ming
Official Fo	orm 108				
		n for Indiv	iduals Filing Unde	r Chapter 7	12/15
If you are an ind	ividual filing under chap	oter 7. vou must fill	out this form if:		
	e claims secured by you	-			
You must file thi	ever is earlier, unless the	ithin 30 days after	ot expired. you file your bankruptcy petition o e time for cause. You must also ser		
	eople are filing together nd date the form.	in a joint case, bo	th are equally responsible for supp	lying correct inform	ation. Both debtors must
	and accurate as possible our name and case num		needed, attach a separate sheet to	this form. On the to	pp of any additional pages,
Part 1: List Y	our Creditors Who Have	Secured Claims			
•	-	rt 1 of Schedule D	: Creditors Who Have Claims Secu	red by Property (Offi	cial Form 106D), fill in the
information be Identify the cr	elow. editor and the property th	at is collateral	What do you intend to do with th secures a debt?	e property that	Did you claim the property as exempt on Schedule C?
Creditor's <b>T</b> name:	oyota Financial Serv	ices	<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeen</li></ul>	n it	□ No
Description of	2011 Toyota Sienna	- 120122	Retain the property and enter in		Yes
property	miles	a 130123	Reaffirmation Agreement.  Retain the property and [explain	n]·	
securing debt	Location: 521 Lince Algonquin IL 60102		Trotain the property and jexplain	· ·	
Part 2: List V	our Unexpired Personal	Property Leases			
For any unexpire in the information	ed personal property lea on below. Do not list rea	ise that you listed I estate leases. Un	in Schedule G: Executory Contract expired leases are leases that are s the trustee does not assume it. 11 t	still in effect; the leas	
Describe your u	unexpired personal prop	erty leases		Will	the lease be assumed?
Lessor's name:				1	No
Description of lea Property:	ased				Yes
Lessor's name:	anad			<b>-</b> 1	No
Description of lea Property:	aseu				⁄es

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Deb	otor 1	Stephanie A. Rector	Case number (if known)	
	sor's n		□ No	
	scription perty:	n of leased	☐ Yes	
	sor's n		□ No	
	scriptioi perty:	n of leased	☐ Yes	
	porty.		☐ Yes	
	sor's n		□ No	
	scription perty:	n of leased	<b></b>	
FIU	perty.		☐ Yes	
Les	sor's n	ame:	□ No	
		n of leased		
Pro	perty:		☐ Yes	
Les	sor's n	ame:	□ No	
		n of leased		
Pro	perty:		☐ Yes	
Par	t 3:	Sign Below		
		alty of perjury, I declare that I have indicat nat is subject to an unexpired lease.	d my intention about any property of my estate that secures a debt and any personal	
X	/s/ S	tephanie A. Rector	X	
		hanie A. Rector	Signature of Debtor 2	
	Signa	ature of Debtor 1		
	Date	October 4, 2016	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-82340 Doc 1 Filed 10/04/16 Entered 10/04/16 16:25:23 Desc Main Document Page 50 of 54

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In re	Stephanie A. Rector		Case No	ı <b>.</b>	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR I	DEBTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	, or agreed to be pa	id to me, for services r	
	For legal services, I have agreed to accept		\$	1,500.00	
	Prior to the filing of this statement I have received			1,500.00	
	Balance Due		\$	0.00	
2. 1	The source of the compensation paid to me was:				
	☐ Debtor ☐ Other (specify): <b>Mother</b>				
3. 7	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. l	■ I have not agreed to share the above-disclosed competent of the share	nsation with any other person	unless they are me	mbers and associates o	of my law firm.
i	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				law firm. A
5. 1	In return for the above-disclosed fee, I have agreed to rene	der legal service for all aspec	ets of the bankruptcy	case, including:	
t c	<ul> <li>Analysis of the debtor's financial situation, and rendering</li> <li>Preparation and filing of any petition, schedules, stater</li> <li>Representation of the debtor at the meeting of creditors</li> <li>[Other provisions as needed]</li> <li>Exemption planning; preparation and filing</li> </ul>	ment of affairs and plan which s and confirmation hearing, a	h may be required; and any adjourned h	earings thereof;	cruptcy;
5. I	By agreement with the debtor(s), the above-disclosed fee on Negotiations with secured creditors to redischargeability actions, judicial lien avoing preparation and filing of motions pursuar	duce to market value; re idances, relief from stay	presentation of t	ther adversary proc	
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement fo	r payment to me for	representation of the	debtor(s) in
0	ctober 4, 2016	/s/ Timothy M. H	uahes		
	ate	Timothy M. Hugh	nes 6208982		
		Signature of Attorn Lavelle Law, Ltd			
		501 W Colfax	•		
		Palatine, IL 6006			
		847.705-9698 Fa thughes@lavelle			
		Name of law firm	iaw.cuii		

### United States Bankruptcy Court Northern District of Illinois

In re	Stephanie A. Rector		Case No.	
		Debtor(s)	Chapter	7
	VEI	RIFICATION OF CREDITOR MAT	ΓRIX	
		Number of Cro	editors: _	26
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditors	s is true and	correct to the best of my
Date:	October 4, 2016	/s/ Stephanie A. Rector Stephanie A. Rector Signature of Debtor		

Algonquin Area Public Library 115 Eastgate Dr. Algonquin, IL 60102

AT & T Wireless P.O.Box 6428 Carol Stream, IL 60197

AT&T POB 5080 Carol Stream, IL 60197

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622

Campion, Curran, Dunlop, Lamb & Cun 8600 US Highway 14 Suite 201 Crystal Lake, IL 60012

Cda/Pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364

Centegra Hospital 4201 W. Medical Center Dr. McHenry, IL 60050

Convergent Outsoucing, Inc Po Box 9004 Renton, WA 98057

ERC/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256

Fed Loan Servicing Po Box 69184 Harrisburg, PA 17106 Gary Lechner 1408 Zimmerman Rd Woodstock, IL 60098

Good Shepard Hospital 450 W Highway 22 Barrington, IL 60010

Illinois Secretary of State Vehicle Services 501 S. 2nd St., Room 312 Springfield, IL 62756

Illinois Secretary of State Driver Services 17 N State St., #1100 Chicago, IL 60602

Katrina Shedor c/o Wilber & Associates, P.C. 210 Landmark Dr. Normal, IL 61761

Matt Shedor c/o Wilber & Associates, P.C. 210 Landmark Dr. Normal, IL 61761

Mercy Health System 1000 Mineral Point Ave Janesville, WI 53548

Mercy McHenry Medical Center 3922 Mercy Dr McHenry, IL 60050

Navy Fcu Po Box 3700 Merrifield, VA 22119

Northern Illinois Medical Center 4201 W. Medical Center Dr McHenry, IL 60050

Office of the Secretary of State Mandatory Insurance Division 429 Howlett Building Springfield, IL 62756-7000

Pinnacle Credit Services Po Box 640 Hopkins, MN 55343

Scott Schwartz N/A Homeless/Rehab

Sherman Hospital 35134 Eagle Way Chicago, IL 60678-1351

Stanislaus Credit Control Service, Inc. Po Box 480 Modesto, CA 95353

Toyota Financial Services Toyota Financial Services Po Box 8026 Cedar Rapids, IA 52409